



Home Visiting in Wisconsin



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Upcoming training opportunities:

Home Visitation Foundations

October 16th – 18th, Wausau

ASQ-3 & ASQ:SE

November 6th, Madison

For the full UW-Extension Schedule:

<http://blogs.ces.uwex.edu/flpconferences/home-visitation-training-events/>

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Implementing Evidence-based Home Visiting Programs in Wisconsin: Family Foundations

Blending state tax dollars and TANF with funding available through the Affordable Care Act, Wisconsin built on the available resources to create one, coordinated program with the expectation that all home visiting programs receiving state support will use an evidence-based model. In keeping with the guiding principle of “depth over breadth”, the State made a commitment to fund a small number of programs through a Request for Proposals (RFP) process, allocating approximately \$6 million in combined state and federal dollars, with sufficient support to fully develop and implement a high quality evidence-based program. Family Foundations Home Visiting is now being implemented by eleven programs serving ten counties and five tribal communities. Eight of the programs are implementing Healthy Families America (with a variety of curricula), two programs are Early Head Start and there is one Nurse-Family Partnership program.

Promoting Safe Sleep Practices

How well the baby is sleeping is one of the greatest concerns of new parents. Mothers and fathers generally want what is best for their baby and search for information from many different sources on how to be good parents. Unfortunately when it comes to sleeping safely, advice is often clouded in personal experience and many parents receive inconsistent information on safe infant sleep environment and positioning.

The safest sleep environment for infants is in their own crib with a firm mattress and a tightly fitted sheet, without soft materials or objects such as bedding or stuffed animals, with the infant placed exclusively on their backs (supine). Through recent research we have learned that approximately 25% of white and 50% of African American parents are not placing their babies supine to sleep. Dr. Rachel Moon identified the most common concerns for parents when considering sleep position are if the baby will be comfortable and the likelihood of choking, not the risk of death. Also, Dr Moon’s research tells us that medical providers provide inconsistent messages about sleep positioning, with only 1/3 of mothers reporting that they received advice on sleep positioning from their physicians.

Home visitors can play a key role in assisting parents with their concerns on infant sleep behaviors and positioning. By understanding parents’ concerns about the safety and comfort of their baby during sleep, home visitors can educate parents on the importance of exclusively placing their baby in supine position and guide parents through the difficult process of training their baby to sleep on his or her back, alone in a crib.

For more information on Promoting Safe Sleep:

- http://www.sidscenter.org/podcasts/2010/asip_amchp/index.html
- <http://www.dhs.wisconsin.gov/publications/P0/P00105.pdf>
- <http://www.healthychildren.org/English/ages-stages/baby/sleep/Pages/A-Parents-Guide-to-Safe-Sleep.aspx>

HomVEE: Home Visiting Evidence of Effectiveness

Interested in what home visiting models have been approved as evidence based?

The answer is here! The Home Visiting Evidence of Effectiveness (HomVEE) meta-analysis was launched by DHHS to conduct a thorough and transparent review of the home visiting research literature and provide an assessment of the evidence of effectiveness for home visiting program models that serve families with pregnant women and children from birth to age 5.

Currently, twelve home visitation models have been federally identified as evidence based:

- Child First
- Early Head Start – Home Visiting
- Early Intervention Program for Adolescent Mothers
- Early Start
- Family Check-Up
- Healthy Families America
- Healthy Steps
- Home Instruction for the Parents of Preschool Youngsters
- Nurse Family Partnership
- Oklahoma’s Community-Based Family Resource and Support
- Parents as Teachers
- Play and Learning Strategies

For more information regarding each of the models, their proven outcomes and information regarding implementation of each of the models, go to: <http://homvee.acf.hhs.gov>

Research Corner

Recent Study Shows Cost-Effectiveness of Evidence-Based Home Visiting

A recent study conducted by the Washington State Institute for Public Policy suggests that home visiting is a cost-effective way to improve child welfare. The study estimated benefits and costs of three home visiting programs identified as “evidence-based” by the Federal Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program: Nurse Family Partnership (NFP), Healthy Families America (HFA), and Parents as Teachers (PAT). All three programs demonstrated a positive rate of return on investment.

In terms of methodology, researchers first identified rigorous studies of each program, then calculated the monetary “benefits” of each program based on outcomes such as reduced rates of alcohol abuse or dependence, use of public assistance, major depressive disorder, child abuse and neglect, disruptive behavior, crime, grade repetition, and repeat teen births; as well as improved test scores, employment outcomes, and rates of high school graduation. These benefits were then compared to the costs of implementing each program, based on average annual cost per family multiplied by the length of the program. Results for each program are presented in the table below:

Program	Total Benefits	Costs	Benefits Minus Costs	Benefit to Cost Ratio
NFP	\$30,325	\$9,421	\$20,905	\$3.23
HFA	\$13,790	\$4,508	\$9,282	\$3.07
PAT	\$7,236	\$4,138	\$3,099	\$1.75

The authors also measured the “riskiness” of their conclusions by varying estimates and assumptions in their statistical models. They found that NFP has an 89% chance of producing benefits that exceed costs, HFA a 98% chance, and PAT a 74% chance. The full report, which also addresses other types of prevention programs, can be found at:

<http://www.wsipp.wa.gov/pub.asp?docid=11-07-1201>.

Useful articles, reports and the latest information related to Home Visiting:

National Home Visiting Technical Assistance Coordinating Center (TACC) through Zero to Three

The TACC works closely with state home visiting programs, national model developers, and other technical assistance providers to coordinate the effective delivery of TA related to home visitor professional development.

Check it out here:

<http://mchb.hrsa.gov/programs/homevisiting/ta/index.html>

Need help finding information related to affiliating your home visiting program with Healthy Families America (HFA)?

http://www.healthyfamiliesamerica.org/network_resources/credentialing.shtml

To obtain an application for affiliation or if you have additional questions, contact: Tracie Lansing, Director, HFA Central Region, tlansing@preventchildabuse.org

Safety guide for home visitors from Partners in Community Outreach:

This manual was originally developed by the Home Visitation Leadership Advisory Coalition in Oklahoma and adapted in 2008 by the OK Department of Health and Partners in Community Outreach to meet the needs of home visitors in West Virginia.

Check it out here:

<http://www.wvpartners.org/documents/SafetyManual-FINAL.pdf>